

## Application Data Sheet

### Application Information

Application number::	Not yet assigned
Filing Date::	Herewith
Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Title::	<u>Blood Glucose Level Control</u>
Attorney Docket Number::	396/04416
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	41
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full capacity
Given Name::	<u>Tami</u>
Family Name::	<u>Harel</u>
City of Residence::	<u>Haifa</u>
Country of Residence::	Israel
Street of mailing address::	22 Harel Street
City of mailing address::	Haifa
Country of mailing address::	Israel
Postal or Zip Code of mailing address::	34555

ILX

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Shai 2-cv  
Family Name:: Policker  
City of Residence:: Moshav Tzur Moshe  
Country of Residence:: Israel  
City of mailing address:: Moshav Tzur Moshe  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 42810

ILX

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Radwan 3-cv  
Family Name:: Khawaled  
City of Residence:: Shfar'am  
Country of Residence:: Israel  
Street of mailing address:: PO Box 5077  
City of mailing address:: Shfar'am  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 20200

ILX

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Yuval 4-cv  
Family Name:: Mika  
City of Residence:: Zichron Yaacov  
Country of Residence:: Israel  
Street of mailing address:: 26 Inbar Street

ILX

City of mailing address:: Zichron Yaacov  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 30900

Applicant Authority Type:: *S-00* Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Offer  
Family Name:: Glasberg  
City of Residence:: Haifa  
Country of Residence:: Israel  
Street of mailing address:: 5 Frug Street  
City of mailing address:: Haifa  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 32447

*ILX*

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: *6-00* Aharon  
Family Name:: Grossman  
City of Residence:: Haifa  
Country of Residence:: Israel  
Street of mailing address:: PO Box 9753  
City of mailing address:: Haifa  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 31097

*ILX*

### Correspondence Information

Correspondence Customer Number ::

44909

## Representative Information

<b>Representative Customer Number::</b>	44909	
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## Domestic Priority Information

<b>Application ::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/IL2003/000736	09/04/03
PCT/IL2003/000736	Continuation-in-part of	10/237,263	09/05/02
10/237,263	Continuation-in-part of	PCT/IL00/00566	09/13/00
This Application	Continuation-in-part of	09/914,889	01/24/02
09/914,889	National Stage of	PCT/IL00/00132	03/05/00
PCT/IL00/00132	An application claiming the benefit under 35 USC 119(e)	60/123,532	03/05/99

[This application has no foreign priority claims]

## Assignee Information

Assignee name::	Metacure N.V.
Street of mailing address::	Werfstraat 6
City of mailing address::	Curacao
Country of mailing address::	Netherlands Antilles